

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NO. ADAMS1100

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VEHICLE IDENTIFICATION SYSTEM

he specification of which	(check only one item below):
is attached	hereto.
Serial No.	United States application
on and was an	nended
	(if applicable).
	as PCT international application
	PCT/IB99/01723
on 21 O	ctober 1999
and was ar	nended under PCT Article 19
o.n	(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefit under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119		
South Africa	98/9689	23 October 1998	_x_ YES NO		
			YES NO		
			YES NO		
			YES NO		
			_ YES _ NO		

PAGE 1 OF 2

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

NATIONAL CHAPTER - US

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (CONTINUED) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NO. ADAMS1100

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

	of this application	_	, 91.30(a) which occu						
PRIOR U.S	S. APPLICATION	IS OR PCT INTER	NATIONAL APPLIC	CATIONS DESI	IGNATING TH	E U.S. FOR BENEF	IT UNDER 35 U.S.C	C. 120:	
U.S. APPLICATIONS						STATUS (MARK ONE)			
U.S. APPLICATION NUMBER			U.S. FILING DATE	U.S. FILING DATE		PATENTED	PENDING	ABANDONED	
_									
PCT APPI	LICATIONS DE	SIGNATING THE	E U.S.						
PCT APPLICATION NO. PCT FILING DATE			U.S. SERIAL NU ASSIGNED (if a						
PCT/IB99/01723 21 October 1999		,							
POWER O	F ATTORNEY: As nark Office connec	a named inventor, I h ted therewith. (List I	nereby appoint the folloname and registration	owing attorney(s) no.)	and/or agent(s) t	o prosecute this appl	cation and transact all	business in the Patent	
CUSTOM	ier numßer	28,213	PL	ACE CUSTOM	MER LABEL HE	ERE			
SEND CORRESPONDENCE TO: Lisa A. Haile, Reg. No. 38,347 GRAY CARY WARE & FREIDENRICH 4365 Executive Drive, Suite 1600 San Diego, CA 92121-2189						DIRECT TELEPHONE CALLS TO: LISA A. HAILE Telephone: 858/677-1456 Fax: 858/677-1465			
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME CASS		FIRST G Leslie	FIRST GIVEN NAME Leslie		SECOND GIVEN NAME John		
	RESIDENCE & CITIZENSHIP	CITY Middelburg			STATE OR FOREIGN COUNTRY South Africa		COUNTRY OF CITIZENSHIP South Africa		
	POST OFFICE ADDRESS	POST OFFICE AI 29 Zuid Street	ODRESS	CITY Middelb	CITY Middelburg		STATE & ZIP CODE/COUNTRY 1055 Republic of South Africa		
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME VOS			FIRST GIVEN NAME Lambertus		SECOND GIVEN NAME Petrus		
	RESIDENCE & CITIZENSHIP	CITY Middelburg			STATE OR FOREIGN COUNTRY South Africa		COUNTRY OF CITIZENSHIP South Africa		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 19 Essenhout Street, Kanonkop		CITY Middelb	CITY Middelburg		STATE & ZIP CODE/COUNTRY 1055 Republic of South Africa		
2 0	FULL NAME OF INVENTOR	FAMILY NAME		FIRST C	FIRST GIVEN NAME		SECOND GIVEN NAME		
3	RESIDENCE & CITIZENSHIP	CITY		STATE	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS		CITY		STATE & ZIP CODE/COUNTRY			
I hereby d	leclare that all state	ware made with the	ON ATTACHED are of my own knowle knowledge that willfu e, and that such willfu	ıl false statement	's and the like so I	made are bunishable	by line or imprisoning	ent, or both, under	
SIGNATURE OF INVENTOR 201 SIGNA			SIGNATURE OF I	TURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203			
DATE: DA			DATE:	TE:		DATE::			

PAGE 2 OF 2

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office